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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	2877 (203-3419)
First Inventor	Richard D. Gresham, et al.
Title	SHEATH INTRODUCTION ...
Express Mail Label No.	EV347962778US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:
Commissioner for Patents
Mail Stop Patent Application
P.O. Box 1450
Alexandria VA 22313-1450

- | | |
|--|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
<i>(Submit an original and a duplicate for fee processing)</i> | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27. | 8. Nucleotide and/or Amino Acid Sequence Submission
<i>(if applicable, all necessary)</i> |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages 34]
<i>(preferred arrangement set forth below)</i> | a. <input type="checkbox"/> Computer Reader Form (CRF) |
| - Descriptive title of the invention | b. Specification Sequence Listing on: |
| - Cross Reference to Related Applications | i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or |
| - Statement Regarding Fed sponsored R & D | ii. <input type="checkbox"/> Paper |
| - Reference to sequence listing, a table, or a computer program listing appendix | c. <input type="checkbox"/> Statements verifying identity of above copies |
| - Background of the Invention | |
| - Brief Summary of the Invention | |
| - Brief Description of the Drawings (<i>if filed</i>) | |
| - Detailed Description | |
| - Claim(s) | |
| - Abstract of the Disclosure | |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 14] | |
| 5. Oath or Declaration [Total Sheets 6] | |
| a. <input type="checkbox"/> Newly executed (original or copy) | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
<i>(for continuation/divisional with Box 18 completed)</i> | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of
<i>(when there is an assignee)</i> Attorney |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s)
name in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b). | 11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>) |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1499 <input type="checkbox"/> Copies of IDS Citations |
| | 13. <input type="checkbox"/> Preliminary Amendment |
| | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> |
| | 15. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> |
| | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its e |
| | 17. <input checked="" type="checkbox"/> Other: Unexecuted Declaration/Power of Attorney
.. Check for \$914.00 |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner _____ Art Unit: _____
 For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)			OR	<input checked="" type="checkbox"/> Correspondence address below
Name	Kimberly V. Perry				
Address	U.S. Surgical, A Division of Tyco Healthcare Group, LP				
150 Glover Avenue					
City	Norwalk	State	Connecticut	Zip Code	06856
Country	US	Telephone	203-845-1000	Fax	203-846-5988
Name (Print/Type)	Francesco Sardone	Registration No. (Attorney/Agent)	47,918		
Signature				Date	11/24/03

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EV347962778US

addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: November 24, 2003


Francesco Sardone
U.S.PTO
10/720510

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FEE TRANSMITTAL

for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 914.00)

Compl te if Known

Application Number	Not Yet Known
Filing Date	Herewith
First Named Inventor	Richard D. Gresham, et al.
Examiner Name	Not Yet Known
Art Unit	Not Yet Known
Attorney Docket No.	2877 (203-3419)

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number 50-2140
 Deposit Account Name Carter, DeLuca, Farrell & Schmidt, LLP

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

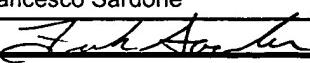
3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$ 0.00)			

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

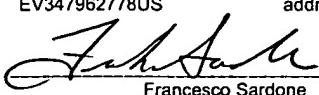
(Complete if applicable)

Name (Print/Type)	Francesco Sardone	Registration No. (Attorney/Agent)	47,918	Telephone (631) 501-5700
Signature		Date	November 24, 2003	

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Dated: November 24, 2003


 Francesco Sardone